

The breathing exercises, and why they matter more than you think

The breathing exercises look small — and they are the strongest tool you have against a chest infection after surgery.

In hospital

Educational draft. Clinical review pending. Quotations retained from the original text are not verified member testimonials.

The breathing exercises are a few minutes of slow, deliberate deep breaths and coughs, repeated through the day — and they may be the single most useful thing you can do for yourself after chest surgery.

Why they matter: after the chest is opened, the lungs want to stay partly deflated, and the air sacs can collapse quietly. Deep breaths hold them open, and coughing clears the fluid that collects while you lie still. The thing everyone is quietly preventing is a chest infection — and this simple routine is one of the strongest tools against it.

What it looks like

- A small plastic device called an incentive spirometer, with a ball or piston you raise by breathing in slowly and deeply. The nurse shows you how, and you do it regularly through the day.
- Deep breaths followed by a short pause — a few seconds of holding — then a slow, relaxed breath out.
- Coughing with a pillow pressed against your chest. It hurts less than it sounds, and it is the part that actually clears your lungs.
- The team sets the rhythm — often every hour or so while you are awake — and they will adjust it as you improve.

The first days, this routine feels pointless and unsatisfying: the breaths are shallow, the cough is weak and it hurts. That is exactly when it matters most. It gets noticeably easier every day, and within days you will do it without thinking.

Why it matters more than you think

The benefits are not only in the lungs. Deep breathing steadies the heart rhythm, helps you move sooner, and every strong cough today is one less problem next week. And here is the honest warning: most people who skip the exercises do not notice anything at first. The trouble shows up later, as fever and a chest infection days after surgery — much easier to prevent than to treat.

“The nurse kept saying ‘again, deeper’. I was cross and sore and bored. Then I remembered her face when she said: this is the closest thing to a free medicine you will ever get. She was right.”

What to ask your team

- How often, and how many breaths, should I aim for each session?
- Should I do the exercises before or after pain relief, so the cough hurts less?
- What should I do if coughing brings up blood or feels impossible?

Take it to your team

Ask the team to show you the exact technique and to set your target number and rhythm. If pain is blocking the exercises, tell them — timing pain relief around the routine is a normal part of the plan.

Call for help if

You cough up a noticeable amount of blood, you develop a fever, or your breathing suddenly becomes harder rather than easier. Some pink streaking when you cough is common after surgery; a lot of blood is not.

The exercises feel small, and their payoff is large. The rhythm, the targets and the pain relief around them are all set by your team — and the decisions about your care belong to you and your team.

Questions to take to my team

☐ How often, and how many breaths, should I aim for each session?

☐ Should I do the exercises before or after pain relief, so the cough hurts less?

☐ What should I do if coughing brings up blood or feels impossible?

For discussion and personal reference. Your care team's individual instructions take priority. For an emergency, contact your local emergency service; do not wait for a community reply.